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Nome: Berbers A. LoBacca

BRINKS HOFER GILSON &LIONE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Appln, of: Marina Goodman et al.

Appin. No.:

09/706.012

Filed:

November 3, 2000

For:

ARCHITECTURES FOR NETCENTRIC

COMPUTING SYSTEMS

Examiner: J. Khosravan Art Unit: 2141

APR 0 8 2005

Attorney Docket No:

10022/089

Commissioner for Patents P. O. Box 1450

Alexandria, VA 22313-1450

TRANSMITTAL

Sir:

Attached is/are:

Change of Correspondence Address \boxtimes

Fee calculation:

図 No additional fee is required.

An extension fee in an amount of \$____for a ___month extension of time under 37 C.F.R. § 1.136(a).

A petition or processing fee in an amount of \$___ under 37 C.F.R. § 1.20(d).

An additional filing fee has been calculated as shown below:

				_	Small Entity		<u> </u>	Not a Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'i Fee	or	Rate	Add'l Fee
Total	20	Minus	56	0	x \$25=			x \$50=	-0-
Indep.	1	Minus	3	0	x 100=			x \$200=	-0-
First Presentation of Multiple Dep. Claim					+\$180=			+ \$380=	
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Fee payment:

The Director is hereby authorized to charge payment of any additional filling fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this paper (including any extension fee required to ensure that this paper is timely filed), or to credit any overpayment, to Deposit Account No. 23-1925.

Sanders N. Hillis (Reg. No. 45,712)

Respectfully submitted

BRINKS

PAGE 02/02

PTO/SB/122 (09-04)
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09/706,012 Application Number CHANGE OF 11/03/2000 Filing Date CORRESPONDENCE ADDRESS Marina Goodman Application First Named Inventor 2141 Art Unit Address to: Jiman Khosravan Commissioner for Patents Examiner Name P.O. Box 1450 Alexandria, VA 22313-1450 10022/089 Attorney Docket Number Please change the Correspondence Address for the above-Identified patent application to: The address associated with 33391 Customer Number: OR Firm or Individual Name Address Zip State City Country Fax Telephone This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number usa "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95). Attorney or agent of record. Registration Number 45,712 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number_ Signature Typed or Printed Senders N. Hillis Name Telephone₃₁₇₋₆₃₆₋₀₈₈₆ Date April 8, 2005 NOTE: Signatures of all the inventors or assigness of record of the entire interest or their representative(s) are required. Submit multiple

Total of one (1) This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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